## JORDAN LAKE STATE RECREATION AREA RV/TENT CAMPING APPLICATION

Name:				
Address:		City:	State: Zip:	
Telephone Number:  CAMPGROUND & CAMPSITE # (please list alternates)  Choice #1		Number of Participants:  CAMPING PERIOD (please list alternates)		
				Arrival
		Choice #2		Arrival
Choice #3		Arrival	Departure	
	PARK H	ours ——		
	January – February	8:00 a.m.	–6:00 p.m.	
	March	8:00 a.m.	•	
	April	8:00 a.m.	– 8:00 p.m.	
	May–August	8:00 a.m.	– 9:00 p.m.	
	September-October	8:00 a.m.	– 8:00 p.m.	
	November-December	8:00 a.m.	- 6:00 p.m.	
	ust be received at the park office t	wo weeks in ad	vance of the desired arrival date	
•	n each park. Pay phones are also a	available in each	park.	
	• •		ecks should be made payable t	
	Reserva	tions		
	Apex, No	3 27523		
	CAMPING PERIOD (please list alternates)			
privileges granted t	hereby, subject to the terms, covenants, o	obligations and res	ervations expressed or implied therei	
Signature:		oate:	_	
	OFFICE US	SE ONLY ——		
Approved by:	-	locaint #	Deter	